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Substitute for form 1449A/PTO

# INFORMATION DISCLOSURE STATEMENT BY APPLICANT

*(use as many sheets as necessary)*

Sheet	1
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of 1

Attorney Docket Number

**Complete if Known**

Application Number	09/982,763
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<b>Filing Date</b>	<b>October 18, 2001</b>
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First Named Inventor	Ruth E. Bauhahn
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Group Art Unit	3762
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Examiner Name	n/a
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Attorney Docket Number	11738.00039
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## U.S. PATENT DOCUMENTS

[illegible]

## FOREIGN PATENT DOCUMENTS

[illegible]

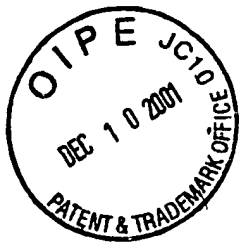
**Examiner  
Signature**

Date Considered

\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>1</sup> Unique citation designation number. <sup>2</sup> See attached Kinds of U.S. Patent Documents. <sup>3</sup> Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). <sup>4</sup> For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. <sup>5</sup> Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 16 if possible. <sup>6</sup> Applicant is to place a check mark here if English language Translation is attached.

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**CERTIFICATE OF MAILING**  
(PATENT APPLICATION)

Express Mail No. EL929162715US

Deposited: December 10, 2001

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By:

*Tony Harris*

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Application of: Bauhahn et al.

Application No.: 09/982,763

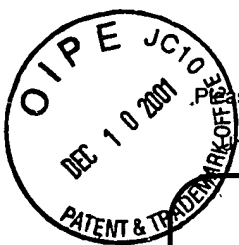
Filing Date: October 18, 2001

Title: Patient Directed Therapy Management

Transmitted herewith are the following documents:

- ☒ Transmittal Form (1 page) in duplicate
- ☒ Information Disclosure Statement (1 page)
- ☒ Form PTO-1449 (1 page) with cited reference
- ☒ Return Postcard

Attorney Case No.: 11738.00039



12-12-01

GPU 3762

PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

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**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	<b>Application Number</b>	09/982,763	
	<b>Filing Date</b>	October 18, 2001	
	<b>First Named Inventor</b>	Ruth E. Bauhahn	
	<b>Group Art Unit</b>	3762	
	<b>Examiner Name</b>	n/a	
<b>Total Number of Pages in This Submission</b>	1	<b>Attorney Docket Number</b>	11738.00039

**ENCLOSURES (check all that apply)**

<input type="checkbox"/> Fee Transmittal Form  <input type="checkbox"/> Fee Attached  <input type="checkbox"/> Amendment / Response  <input type="checkbox"/> After Final  <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Missing Parts/ Incomplete Application  <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application)  <input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition  <input type="checkbox"/> Petition to Convert to a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):  Information Disclosure Statement (1 page) Form PTO-1449 (1 page) with cited reference Return Receipt Postcard
<b>Remarks</b>		The Commissioner is hereby authorized to charge any deficiencies in payment or credit any overpayment to our Deposit Account No. 01-0850.

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

<b>Firm or Individual name</b>	Binal J. Patel
<b>Signature</b>	
<b>Date</b>	December 10, 2001

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